

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

**HOW TO FILE AN EMPLOYMENT DISCRIMINATION COMPLAINT:
INSTRUCTIONS FOR PERSONS WITHOUT AN ATTORNEY**

This packet includes each of the following forms:

1. How to File an Employment Discrimination Complaint (Intake 1);
2. Employment Discrimination Complaint (Intake 2);
3. Application to Proceed In Forma Pauperis (Intake 3);
4. Request for Appointment of Counsel (Intake 4).

I. GENERAL INSTRUCTIONS

A. Three completed copies of each applicable form should be sent to the Court. Upon filing, the Clerk will return to you a file stamped copy of each document. If the documents submitted by you are not complete, you will be advised. When you mail in the forms, you should keep one set for your records.

B. All blanks must be filled in. If an entry does not apply to you, write "not applicable" in the provided space.

C. The filing fee for a complaint is \$150.00. If you are financially unable to pay that fee, you must complete the Application to Proceed In Forma Pauperis (Intake 3). If you are able to pay the \$150.00 filing fee, you need not complete the Application to Proceed In Forma Pauperis. However, you must prepare a summons, have it issued by the Clerk's Office and make arrangements with a private process server to have your summons and complaint served upon the defendant.

D. If you want the Court to appoint an attorney to represent you, you must complete the Request for Appointment of Counsel (Intake 4).

E. Your complaint must be filed within the time specified by your Notice-Of-Right-To-Sue letter.

F. If you contact the Court about your case, you must use the name and number of the case: for instance, Jones v. Acme Construction, C86-0123ABC. This number will be stamped on the copies of your documents returned by the Clerk when your case is filed. The letters at the end of the number are the initials of the judge to whom your case has been randomly assigned. These letters are part of the case number and must be used by you if you inquire about your case.

G. You must notify the Clerk promptly if your mailing address changes. If the Court is unable to contact you, your case may be dismissed for lack of prosecution.

H. Before mailing your forms to the Court, you should remove these instructions and keep for reference.

I. If you are filing a complaint against a Federal Agency, you should fill out all parts of the forms that apply to you and add any additional information that is appropriate.

J. If you are a minor, include only your initials on all documents where your name is requested. **DO NOT INCLUDE YOUR NAME.**

1 **II. EMPLOYMENT DISCRIMINATION COMPLAINT (Intake 2)**

2 A. Insert the name of the employer(s) against whom you are complaining in the heading
3 above the word "Defendant(s)." If you are complaining against a federal agency, department or unit,
4 insert the title of the head of that agency, department or unit above the word "Defendant(s)." (For
5 example, if you are complaining against the U.S. Postal Service, insert "Postmaster General;" if you are
6 complaining against the U.S. Navy, insert "Secretary of the Navy.") Write your name above the word
7 "Plaintiff."

8 B. Paragraphs 1 and 2 - Be sure to provide full and accurate addresses.

9 C. Paragraph 9 - Be sure to attach a copy of your Notice-Of-Right-To-Sue letter.

10 THE COMPLAINT MUST BE FILED WITHIN THE TIME SPECIFIED
11 IN YOUR NOTICE-OF-RIGHT-TO-SUE LETTER

12 **III. APPLICATION TO PROCEED IN FORMA PAUPERIS (Intake 3)**

13 A. This form should be used ONLY if you are financially unable to pay the \$150.00 filing
14 fee. Each complaint must be accompanied with either a \$150.00 payment or a completed Application
15 to Proceed In Forma Pauperis.

16 B. All blanks must be filled in. If an entry does not apply to you, write "not applicable" in
17 the provided space.

18 **IV. REQUEST FOR APPOINTMENT OF COUNSEL (Intake 4)**

19 A. Use this form ONLY if you are asking the Court to appoint a lawyer to represent you.

20 B. The Court is not required to appoint a lawyer to represent you. The judge will decide
21 whether an appointment will be made in your case based upon the information you provide in this form.

22 C. Federal employees can obtain a copy of the investigative file from the Federal Agency
23 where the original complaint was filed by calling that agency for information. Non-Federal employees
24 can obtain a copy of the investigative file from the Equal Employment Opportunity Commission by
25 calling (415) 356-5100 and by requesting an appointment at which time the file may be copied.

26 D. Paragraph 4 - You must make a reasonable effort on your own to obtain an attorney
27 before the Court will consider appointing one to represent you. List in paragraph 4 all attorneys
28 contacted by you who were unwilling or unable to take your case.

 When the forms are completed, bring them or mail them to:

 Clerk, United States District Court
 450 Golden Gate Avenue
 P.O. Box 36060
 San Francisco, CA 94102

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

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Plaintiff,)	
)	
vs.)	CASE NO. _____
)	
)	EMPLOYMENT DISCRIMINATION
)	COMPLAINT
Defendant(s).)	
)	
_____)	

1. Plaintiff resides at:
Address _____
City, State & Zip Code _____
Phone (____) _____
2. Defendant is located at:
Address _____
City, State & Zip Code _____
3. This action is brought pursuant to Title VII of the Civil Rights Act of 1964 for employment discrimination. Jurisdiction is conferred on this Court by 42 U.S.C. Section 2000e-5. Equitable and other relief is sought under 42 U.S.C. Section 2000e-5(g).
4. The acts complained of in this suit concern:
 - a. ___ Failure to employ me.

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1 Department of Fair Employment and Housing) regarding defendant's alleged discriminatory conduct on
2 or about _____.

3 (DATE)

4 9. The Equal Employment Opportunity Commission issued a Notice-of-Right-to-Sue letter (copy
5 attached), which was received by me on or about _____.

6 (DATE)

7 10. Plaintiff hereby demands a jury for all claims for which a jury is permitted:

8 Yes _____ No _____

9 11. WHEREFORE, plaintiff prays that the Court grant such relief as may be appropriate, including
10 injunctive orders, damages, costs, and attorney fees.

11
12 DATED: _____

13 _____
14 SIGNATURE OF PLAINTIFF

15 (PLEASE NOTE: NOTARIZATION

16 IS NOT REQUIRED.)

17 _____
18 PLAINTIFF'S NAME

19 (Printed or Typed)
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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

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Plaintiff,)	CASE NO. _____
)	
vs.)	APPLICATION TO PROCEED
)	<u>IN FORMA PAUPERIS</u>
)	
Defendant.)	
_____)	

I, _____, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ____ No ____

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary and

1 wages per month which you received.

2 _____
3 _____
4 _____

5 2. Have you received, within the past twelve (12) months, any money from any of the following
6 sources:

- 7 a. Business, Profession or Yes ____ No ____
8 self employment
9 b. Income from stocks, bonds, Yes ____ No ____
10 or royalties?
11 c. Rent payments? Yes ____ No ____
12 d. Pensions, annuities, or Yes ____ No ____
13 life insurance payments?
14 e. Federal or State welfare payments, Yes ____ No ____
15 Social Security or other govern-
16 ment source?

17 If the answer is "yes" to any of the above, describe each source of money and state the amount
18 received from each.

19 _____
20 _____

21 3. Are you married? Yes ____ No ____

22 Spouse's Full Name: _____

23 Spouse's Place of Employment: _____

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ _____ Net \$ _____

26 4. a. List amount you contribute to your spouse's support: \$ _____

27 b. List the persons other than your spouse who are dependent upon you for support and
28 indicate how much you contribute toward their support. (NOTE: For minor children,

1 list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

2 _____

3 _____

4 5. Do you own or are you buying a home? Yes ____ No ____

5 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6 6. Do you own an automobile? Yes ____ No ____

7 Make _____ Year _____ Model _____

8 Is it financed? Yes ____ No ____ If so, Total due: \$ _____

9 Monthly Payment: \$ _____

10 7. Do you have a bank account? Yes ____ No ____ (Do not include account numbers.)

11 Name(s) and address(es) of bank: _____

12 _____

13 Present balance(s): \$ _____

14 Do you own any cash? Yes ____ No ____ Amount: \$ _____

15 Do you have any other assets? (If "yes," provide a description of each asset and its estimated market
16 value.) Yes ____ No ____

17 _____

18 8. What are your monthly expenses?

19 Rent: \$ _____ Utilities: _____

20 Food: \$ _____ Clothing: _____

21 Charge Accounts:

22 Name of Account Monthly Payment Total Owed on This Account

23 _____ \$ _____ \$ _____

24 _____ \$ _____ \$ _____

25 _____ \$ _____ \$ _____

26 9. Do you have any other debts? (List current obligations, indicating amounts and to whom they
27 are payable. Do not include account numbers.)

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ____ No ____

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

_____	_____
DATE	SIGNATURE OF APPLICANT

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8 **UNITED STATES DISTRICT COURT**
9 **NORTHERN DISTRICT OF CALIFORNIA**

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11
12 Plaintiff(s),

13 v.

14
15 Defendant(s).

CASE NO. _____

**REQUEST FOR APPOINTMENT OF
COUNSEL UNDER THE CIVIL
RIGHTS ACT OF 1964, 442 U.S.C.,
SEC. 2000e-5(f)(1)(B);
DECLARATION IN SUPPORT
OF REQUEST**

16 1. I, the plaintiff in the above-entitled employment discrimination action, request that the Court
17 appoint an attorney to represent me in this matter. In support of this request, I state as follows:

- 18 a. My claim is meritorious (that is, I have a good case);
19 b. I have made a reasonably diligent effort to obtain counsel;
20 c. I am unable to find an attorney willing to represent me on terms that I can afford.

21 2. A copy of the Notice-of-Right-to-Sue letter I received from the Equal Employment
22 Opportunity Commission is attached to the complaint which accompanies this request for counsel.

23 3. a. Does the Notice-of-Right-to-Sue letter show that the Commission found no reasonable
24 cause to believe the allegations made in your charge were true?

25 _____ Yes _____ No

26 IF YOUR ANSWER IS "YES," YOU MUST ATTACH A COPY OF THE COM-
27 MISSION'S INVESTIGATIVE FILE TO THIS REQUEST AND ANSWER QUESTIONS B AND
28 C.

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- 1 b. _____
 2 c. _____
 3 d. _____
 4 e. _____
 5 f. _____

6 5. I cannot afford to obtain a private attorney. The details of my financial situation are listed
 7 below:

8 a. EMPLOYMENT

9 Are you employed now? Yes _____ No _____ Am self-employed _____

10 Name and address of employer: _____

11 _____

12 If YES, how much do you If NO, give month and year of
 13 earn per month? \$_____ last employment _____

14 How much did you earn per
 15 month? \$_____

16 If married, is your Spouse employed? Yes _____ No _____

17 If YES, how much does your Spouse earn per month? \$_____

18 If a minor under age 21, what is your Parents or Guardian's approximate monthly income?
 19 \$_____

20 b. ASSETS

21 1) Other Income

22 Have you received within the past 12 months any income from a business, profession or
 23 other form of self-employment, or in the form of rent payments, interest, dividends,
 24 retirement or annuity payments or other sources?

25 Yes _____ No _____

26 Received Sources

27 If YES, give the amount \$_____

28 received & identify the sources \$_____

1 \$ _____

2 2) Cash

3 Do you have any cash on hand or money in savings or checking accounts?

4 Yes _____ No _____

5 If YES, state total amount \$ _____

6 3) Property

7 Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable
8 property (excluding ordinary household furnishings and clothing)?

9 Yes _____ No _____

10	Value	Description
11	If YES, give value and \$ _____	
12	describe it	\$ _____
13		\$ _____
14		\$ _____

15 c. OBLIGATIONS AND DEBTS

16 1) Dependents (NOTE: For minor children, list only their initials and ages. DO
17 NOT INCLUDE THEIR NAMES.)

18	Marital Status	Total Number	List persons you actually support
19		of Dependents	and your relationship to them.
20	_____ Single	_____	_____
21			_____
22	_____ Married		_____
23			_____
24	_____ Widowed		_____
25	Separated or		_____
26	Divorced		_____

27 2) Debts and Monthly Bills

28 List all creditors, including banks, loan companies, charge accounts, etc. (Do not

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include account numbers.)

Creditors	Total Debt	Monthly Pmt.
RENT: _____	\$ _____	\$ _____
MORTGAGE		
ON HOME: _____	\$ _____	\$ _____
OTHER: _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

I declare under penalty of perjury that the above is true and correct.

DATE

SIGNATURE OF PLAINTIFF